

EXHIBIT U

**METROPOLITAN LIFE INSURANCE COMPANY
LTD (and Sr. LTD) CLAIMS SPECIALIST SURVEY**

Name: Adalie Arroyo

Date: ¹⁵February 14, 2018

Please fill out this survey and indicate below which of the following tasks you regularly perform or can perform in connection with the LTD claims in your book of claims. Answering "Yes" means you perform or can perform the task on some or all of your claims. Answering "No" means you do not ever perform that task or you do so rarely.

- 1) Verifying that the claimant is eligible for coverage under the LTD benefits plan? ☒ Yes ☐ No
- 2) Interpreting and understanding the applicable LTD plan provisions, including the definition of disability under the plan, and deciding whether a condition described in claimant's application meets the definition? ☒ Yes ☐ No
- 3) Reviewing and understanding the claimant's occupational duties and occupational requirements? ☒ Yes ☐ No
- 4) Analyzing the claimant's medical records, determining whether additional information is necessary and then evaluating whether the claimant's medical records are consistent with the medical diagnosis? ☒ Yes ☐ No
- 5) Communicating with health care providers and/or employers, including if information requires clarification? ☒ Yes ☐ No
- 6) Serving as the face of MetLife with claimants, health care providers and employers, including guiding the claimant through the claim process? ☒ Yes ☐ No
- 7) Interacting with attorneys where claimants are represented by counsel? ☒ Yes ☐ No
- 8) Deciding whether to interview claimants and conducting interviews with claimants (including deciding what questions to ask) prior to making the claim decision? ☒ Yes ☐ No
- 9) Assessing during the claimant interview whether the claimant is telling the truth, including making credibility determinations? ☒ Yes ☐ No
- 10) Evaluating whether the claimant's current activities are consistent with the diagnosis and restrictions? ☒ Yes ☐ No
- 11) Determining the claimant's motivation and expectations for returning to work with or without accommodations? ☒ Yes ☐ No
- 12) Determining the amount of any offsets or other amounts (such as social security, state disability benefits, workers' compensation, income from other occupations, settlement money for lost wages) that may impact the claimant's LTD benefits calculation? ☒ Yes ☐ No
- 13) Identifying and investigating discrepancies between the claimant's subjective complaints and the objective clinical findings in the claimant's medical records as well as any discrepancies in medical documentation? ☒ Yes ☐ No
- 14) Determining and/or formulating opinions regarding the claimant's actual level of functionality, considering all sources of information? ☒ Yes ☐ No
- 15) Conducting an interview with the claimant's employer and/or health care providers to obtain information relevant to the claim? ☒ Yes ☐ No
- 16) Assigning an appropriate "Likely Claims Progression" category for each claim and reviewing factual information to adjust that Progression if needed? ☒ Yes ☐ No
- 17) Developing and documenting an action plan and/or investigation scope for each claim (i.e., missing/needed information, discrepancies, to-do list, etc.)? ☒ Yes ☐ No
- 18) Evaluating the restrictions and limitations identified in the claimant's medical records and whether/how they impact the claimant's ability to perform their own occupation? ☒ Yes ☐ No

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- 19) In cases involving multiple diagnoses, determining which of the claimant's conditions is the disabling condition and/or what is causing or contributing to the claimant's impairment? ☐ Yes ☒ No
- 20) Determining whether the primary disabling condition is an "excluded" condition under the claimant's LTD benefits plan? ☒ Yes ☐ No
- 21) Determining whether to extend ERISA deadlines given the timing and circumstances of the claim? ☐ Yes ☐ No
- 22) Determining whether and when it is appropriate to involve a clinician, vocational rehabilitation expert or other internal resource(s)? ☒ Yes ☐ No
- 23) Determining whether a claim requires additional investigation, including by the Special Investigation Unit (i.e. home visits, surveillance, social media searches, etc.)? ☒ Yes ☐ No
- 24) Evaluating and applying investigation materials/information received from the Special Investigation Unit? ☒ Yes ☐ No
- 25) Having social media searches conducted (or doing them on your own) and/or evaluating social media investigation findings? ☐ Yes ☒ No
- 26) Evaluating whether the claimant is actually following the treatment plan recommended by his/her health care professional (filling prescriptions, participating in therapy, etc.)? ☒ Yes ☐ No
- 27) Identifying and collaborating with MetLife attorneys and/or account representatives on complex claims involving legal issues or plan interpretations? ☒ Yes ☐ No
- 28) Evaluating claims for possible fraud? ☐ Yes ☒ No
- 29) Deciding whether a Claim Discussion Meeting ("CDM") with Unit Leaders, clinicians, vocational rehabilitation professionals, or other internal resources is needed for a claim? ☒ Yes ☐ No
- 30) Assessing whether an injured employee can return to work and what, if any, accommodations need to be made at the workplace to facilitate the employee's return? ☒ Yes ☐ No
- 31) Assessing the claimant's education, skills, alternate work experience, training, functionality and geographic area to determine whether he or she can return to work in any occupation? ☒ Yes ☐ No
- 32) Determining whether Labor Market Surveys, Transferable Skills Analysis or Own Occupational Assessments should be requested? ☒ Yes ☐ No
- 33) Evaluating whether the claimant is a candidate for vocational rehabilitation? ☒ Yes ☐ No
- 34) Acting as the owner of the long term disability claims in your assigned book of claims? ☐ Yes ☐ No
- 35) Evaluating the facts and the terms of the LTD plan and all medical information to determine whether to approve or deny a claim? ☒ Yes ☐ No
- 36) Rendering decisions (i.e., approval, denial, continuation, modification, termination) on claims for LTD benefits? ☒ Yes ☐ No
- 37) Validating the appropriate benefit amount for the claim and authorizing payment of claims up to prescribed per-month authority limits? ☒ Yes ☐ No
- 38) Preparing claim determination letters, including giving a reason for the claim decision, and communicating claim decisions to claimants? ☒ Yes ☐ No
- 39) Reassessing medical information, restrictions and limitations during the life of the claim to determine whether a claim should be continued, modified or terminated? ☒ Yes ☐ No
- 40) Mentoring and coaching less experienced LTD Claims Specialists? ☒ Yes ☐ No

Hedalie Array
PRINT NAME

Hedalie Array
SIGN NAME

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**METROPOLITAN LIFE INSURANCE COMPANY
LTD (and Sr. LTD) CLAIMS SPECIALIST SURVEY**

Name: Courtney Carlo Date: 2/14/18

Please fill out this survey and indicate below which of the following tasks you regularly perform or can perform in connection with the LTD claims in your book of claims. Answering "Yes" means you perform or can perform the task on some or all of your claims. Answering "No" means you do not ever perform that task or you do so rarely.

- 1) Verifying that the claimant is eligible for coverage under the LTD benefits plan? ☒ Yes ___ No
- 2) Interpreting and understanding the applicable LTD plan provisions, including the definition of disability under the plan, and deciding whether a condition described in claimant's application meets the definition? ☒ Yes ___ No
- 3) Reviewing and understanding the claimant's occupational duties and occupational requirements? ☒ Yes ___ No
- 4) Analyzing the claimant's medical records, determining whether additional information is necessary and then evaluating whether the claimant's medical records are consistent with the medical diagnosis? ☒ Yes ___ No
- 5) Communicating with health care providers and/or employers, including if information requires clarification? ☒ Yes ___ No
- 6) Serving as the face of MetLife with claimants, health care providers and employers, including guiding the claimant through the claim process? ☒ Yes ___ No
- 7) Interacting with attorneys where claimants are represented by counsel? ☒ Yes ___ No
- 8) Deciding whether to interview claimants and conducting interviews with claimants (including deciding what questions to ask) prior to making the claim decision? ☒ Yes ___ No
- 9) Assessing during the claimant interview whether the claimant is telling the truth, including making credibility determinations? ☒ Yes ___ No
- 10) Evaluating whether the claimant's current activities are consistent with the diagnosis and restrictions? ☒ Yes ___ No
- 11) Determining the claimant's motivation and expectations for returning to work with or without accommodations? ☒ Yes ___ No
- 12) Determining the amount of any offsets or other amounts (such as social security, state disability benefits, workers' compensation, income from other occupations, settlement money for lost wages) that may impact the claimant's LTD benefits calculation? ☒ Yes ___ No
- 13) Identifying and investigating discrepancies between the claimant's subjective complaints and the objective clinical findings in the claimant's medical records as well as any discrepancies in medical documentation? ☒ Yes ___ No
- 14) Determining and/or formulating opinions regarding the claimant's actual level of functionality, considering all sources of information? ☒ Yes ___ No
- 15) Conducting an interview with the claimant's employer and/or health care providers to obtain information relevant to the claim? ☒ Yes ___ No
- 16) Assigning an appropriate "Likely Claims Progression" category for each claim and reviewing factual information to adjust that Progression if needed? ☒ Yes ___ No
- 17) Developing and documenting an action plan and/or investigation scope for each claim (i.e., missing/needed information, discrepancies, to-do list, etc.)? ☒ Yes ___ No
- 18) Evaluating the restrictions and limitations identified in the claimant's medical records and whether/how they impact the claimant's ability to perform their own occupation? ☒ Yes ___ No

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- 19) In cases involving multiple diagnoses, determining which of the claimant's conditions is the disabling condition and/or what is causing or contributing to the claimant's impairment? ☒ Yes ___ No
- 20) Determining whether the primary disabling condition is an "excluded" condition under the claimant's LTD benefits plan? ☒ Yes ___ No
- 21) Determining whether to extend ERISA deadlines given the timing and circumstances of the claim? ☒ Yes ___ No
- 22) Determining whether and when it is appropriate to involve a clinician, vocational rehabilitation expert or other internal resource(s)? ☒ Yes ___ No
- 23) Determining whether a claim requires additional investigation, including by the Special Investigation Unit (i.e. home visits, surveillance, social media searches, etc.)? ☒ Yes ___ No
- 24) Evaluating and applying investigation materials/information received from the Special Investigation Unit? ☒ Yes ___ No
- 25) Having social media searches conducted (or doing them on your own) and/or evaluating social media investigation findings? ☒ Yes ___ No
- 26) Evaluating whether the claimant is actually following the treatment plan recommended by his/her health care professional (filling prescriptions, participating in therapy, etc.)? ☒ Yes ___ No
- 27) Identifying and collaborating with MetLife attorneys and/or account representatives on complex claims involving legal issues or plan interpretations? ☒ Yes ___ No
- 28) Evaluating claims for possible fraud? ☒ Yes ___ No
- 29) Deciding whether a Claim Discussion Meeting ("CDM") with Unit Leaders, clinicians, vocational rehabilitation professionals, or other internal resources is needed for a claim? ☒ Yes ___ No
- 30) Assessing whether an injured employee can return to work and what, if any, accommodations need to be made at the workplace to facilitate the employee's return? ☒ Yes ___ No
- 31) Assessing the claimant's education, skills, alternate work experience, training, functionality and geographic area to determine whether he or she can return to work in any occupation? ☒ Yes ___ No
- 32) Determining whether Labor Market Surveys, Transferable Skills Analysis or Own Occupational Assessments should be requested? ☒ Yes ___ No
- 33) Evaluating whether the claimant is a candidate for vocational rehabilitation? ☒ Yes ___ No
- 34) Acting as the owner of the long term disability claims in your assigned book of claims? ☒ Yes ___ No
- 35) Evaluating the facts and the terms of the LTD plan and all medical information to determine whether to approve or deny a claim? ☒ Yes ___ No
- 36) Rendering decisions (i.e., approval, denial, continuation, modification, termination) on claims for LTD benefits? ☒ Yes ___ No
- 37) Validating the appropriate benefit amount for the claim and authorizing payment of claims up to prescribed per-month authority limits? ☒ Yes ___ No
- 38) Preparing claim determination letters, including giving a reason for the claim decision, and communicating claim decisions to claimants? ☒ Yes ___ No
- 39) Reassessing medical information, restrictions and limitations during the life of the claim to determine whether a claim should be continued, modified or terminated? ☒ Yes ___ No
- 40) Mentoring and coaching less experienced LTD Claims Specialists? ☒ Yes ___ No

Courtney Carlo
PRINT NAME

Courtney Carlo
SIGN NAME

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**METROPOLITAN LIFE INSURANCE COMPANY
LTD (and Sr. LTD) CLAIMS SPECIALIST SURVEY**

Name: Tammy Crego Date: 2/12/18

Please fill out this survey and indicate below which of the following tasks you regularly perform or can perform in connection with the LTD claims in your book of claims. Answering "Yes" means you perform or can perform the task on some or all of your claims. Answering "No" means you do not ever perform that task or you do so rarely.

- 1) Verifying that the claimant is eligible for coverage under the LTD benefits plan? ☒ Yes ☐ No
- 2) Interpreting and understanding the applicable LTD plan provisions, including the definition of disability under the plan, and deciding whether a condition described in claimant's application meets the definition? ☒ Yes ☐ No
- 3) Reviewing and understanding the claimant's occupational duties and occupational requirements? ☒ Yes ☐ No
- 4) Analyzing the claimant's medical records, determining whether additional information is necessary and then evaluating whether the claimant's medical records are consistent with the medical diagnosis? ☒ Yes ☐ No
- 5) Communicating with health care providers and/or employers, including if information requires clarification? ☒ Yes ☐ No
- 6) Serving as the face of MetLife with claimants, health care providers and employers, including guiding the claimant through the claim process? ☒ Yes ☐ No
- 7) Interacting with attorneys where claimants are represented by counsel? ☒ Yes ☐ No
- 8) Deciding whether to interview claimants and conducting interviews with claimants (including deciding what questions to ask) prior to making the claim decision? ☒ Yes ☐ No
- 9) Assessing during the claimant interview whether the claimant is telling the truth, including making credibility determinations? ☒ Yes ☐ No
- 10) Evaluating whether the claimant's current activities are consistent with the diagnosis and restrictions? ☒ Yes ☐ No
- 11) Determining the claimant's motivation and expectations for returning to work with or without accommodations? ☒ Yes ☐ No
- 12) Determining the amount of any offsets or other amounts (such as social security, state disability benefits, workers' compensation, income from other occupations, settlement money for lost wages) that may impact the claimant's LTD benefits calculation? ☒ Yes ☐ No
- 13) Identifying and investigating discrepancies between the claimant's subjective complaints and the objective clinical findings in the claimant's medical records as well as any discrepancies in medical documentation? ☒ Yes ☐ No
- 14) Determining and/or formulating opinions regarding the claimant's actual level of functionality, considering all sources of information? ☒ Yes ☐ No
- 15) Conducting an interview with the claimant's employer and/or health care providers to obtain information relevant to the claim? ☒ Yes ☐ No
- 16) Assigning an appropriate "Likely Claims Progression" category for each claim and reviewing factual information to adjust that Progression if needed? ☒ Yes ☐ No
- 17) Developing and documenting an action plan and/or investigation scope for each claim (i.e., missing/needed information, discrepancies, to-do list, etc.)? ☒ Yes ☐ No
- 18) Evaluating the restrictions and limitations identified in the claimant's medical records and whether/how they impact the claimant's ability to perform their own occupation? ☒ Yes ☐ No

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- 20) Determining whether the primary disabling condition is an "excluded" condition under the claimant's LTD benefits plan? ☒ Yes ☐ No
- 21) Determining whether to extend ERISA deadlines given the timing and circumstances of the claim? ☒ Yes ☐ No
- 22) Determining whether and when it is appropriate to involve a clinician, vocational rehabilitation expert or other internal resource(s)? ☒ Yes ☐ No
- 23) Determining whether a claim requires additional investigation, including by the Special Investigation Unit (i.e. home visits, surveillance, social media searches, etc.)? ☒ Yes ☐ No
- 24) Evaluating and applying investigation materials/information received from the Special Investigation Unit? ☒ Yes ☐ No
- 25) Having social media searches conducted (or doing them on your own) and/or evaluating social media investigation findings? ☒ Yes ☐ No
- 26) Evaluating whether the claimant is actually following the treatment plan recommended by his/her health care professional (filling prescriptions, participating in therapy, etc.)? ☒ Yes ☐ No
- 27) Identifying and collaborating with MetLife attorneys and/or account representatives on complex claims involving legal issues or plan interpretations? ☒ Yes ☐ No
- 28) Evaluating claims for possible fraud? ☒ Yes ☐ No
- 29) Deciding whether a Claim Discussion Meeting ("CDM") with Unit Leaders, clinicians, vocational rehabilitation professionals, or other internal resources is needed for a claim? ☒ Yes ☐ No
- 30) Assessing whether an injured employee can return to work and what, if any, accommodations need to be made at the workplace to facilitate the employee's return? ☒ Yes ☐ No
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- 32) Determining whether Labor Market Surveys, Transferable Skills Analysis or Own Occupational Assessments should be requested? ☒ Yes ☐ No
- 33) Evaluating whether the claimant is a candidate for vocational rehabilitation? ☒ Yes ☐ No
- 34) Acting as the owner of the long term disability claims in your assigned book of claims? ☒ Yes ☐ No
- 35) Evaluating the facts and the terms of the LTD plan and all medical information to determine whether to approve or deny a claim? ☒ Yes ☐ No
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- 38) Preparing claim determination letters, including giving a reason for the claim decision, and communicating claim decisions to claimants? ☒ Yes ☐ No
- 39) Reassessing medical information, restrictions and limitations during the life of the claim to determine whether a claim should be continued, modified or terminated? ☒ Yes ☐ No
- 40) Mentoring and coaching less experienced LTD Claims Specialists? ☒ Yes ☐ No

Tammy Crego
PRINT NAME

DBL/ 94376110.1

Tammy Crego
SIGN NAME

**METROPOLITAN LIFE INSURANCE COMPANY
LTD (and Sr. LTD) CLAIMS SPECIALIST SURVEY**

Name: Sharon Deforge

Date: February 14, 2018

Please fill out this survey and indicate below which of the following tasks you regularly perform or can perform in connection with the LTD claims in your book of claims. Answering "Yes" means you perform or can perform the task on some or all of your claims. Answering "No" means you do not ever perform that task or you do so rarely.

- 1) Verifying that the claimant is eligible for coverage under the LTD benefits plan? ☒ Yes ☐ No
- 2) Interpreting and understanding the applicable LTD plan provisions, including the definition of disability under the plan, and deciding whether a condition described in claimant's application meets the definition? ☒ Yes ☐ No
- 3) Reviewing and understanding the claimant's occupational duties and occupational requirements? ☒ Yes ☐ No
- 4) Analyzing the claimant's medical records, determining whether additional information is necessary and then evaluating whether the claimant's medical records are consistent with the medical diagnosis? ☒ Yes ☐ No
- 5) Communicating with health care providers and/or employers, including if information requires clarification? ☒ Yes ☐ No
- 6) Serving as the face of MetLife with claimants, health care providers and employers, including guiding the claimant through the claim process? ☒ Yes ☐ No
- 7) Interacting with attorneys where claimants are represented by counsel? ☒ Yes ☐ No
- 8) Deciding whether to interview claimants and conducting interviews with claimants (including deciding what questions to ask) prior to making the claim decision? ☐ Yes ☒ No
- 9) Assessing during the claimant interview whether the claimant is telling the truth, including making credibility determinations? ☐ Yes ☒ No
- 10) Evaluating whether the claimant's current activities are consistent with the diagnosis and restrictions? ☒ Yes ☐ No
- 11) Determining the claimant's motivation and expectations for returning to work with or without accommodations? ☒ Yes ☐ No
- 12) Determining the amount of any offsets or other amounts (such as social security, state disability benefits, workers' compensation, income from other occupations, settlement money for lost wages) that may impact the claimant's LTD benefits calculation? ☒ Yes ☐ No
- 13) Identifying and investigating discrepancies between the claimant's subjective complaints and the objective clinical findings in the claimant's medical records as well as any discrepancies in medical documentation? ☒ Yes ☐ No
- 14) Determining and/or formulating opinions regarding the claimant's actual level of functionality, considering all sources of information? ☒ Yes ☐ No
- 15) Conducting an interview with the claimant's employer and/or health care providers to obtain information relevant to the claim? ☒ Yes ☐ No
- 16) Assigning an appropriate "Likely Claims Progression" category for each claim and reviewing factual information to adjust that Progression if needed? ☒ Yes ☐ No
- 17) Developing and documenting an action plan and/or investigation scope for each claim (i.e., missing/needed information, discrepancies, to-do list, etc.)? ☒ Yes ☐ No
- 18) Evaluating the restrictions and limitations identified in the claimant's medical records and whether/how they impact the claimant's ability to perform their own occupation? ☒ Yes ☐ No

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- 19) In cases involving multiple diagnoses, determining which of the claimant's conditions is the disabling condition and/or what is causing or contributing to the claimant's impairment? ☒ Yes ☐ No
- 20) Determining whether the primary disabling condition is an "excluded" condition under the claimant's LTD benefits plan? ☒ Yes ☐ No
- 21) Determining whether to extend ERISA deadlines given the timing and circumstances of the claim? ☒ Yes ☐ No
- 22) Determining whether and when it is appropriate to involve a clinician, vocational rehabilitation expert or other internal resource(s)? ☒ Yes ☐ No
- 23) Determining whether a claim requires additional investigation, including by the Special Investigation Unit (i.e. home visits, surveillance, social media searches, etc.)? ☒ Yes ☐ No
- 24) Evaluating and applying investigation materials/information received from the Special Investigation Unit? ☒ Yes ☐ No
- 25) Having social media searches conducted (or doing them on your own) and/or evaluating social media investigation findings? ☒ Yes ☐ No *I do not do my own investigation, only do a 'google' search.*
- 26) Evaluating whether the claimant is actually following the treatment plan recommended by his/her health care professional (filling prescriptions, participating in therapy, etc.)? ☒ Yes ☐ No
- 27) Identifying and collaborating with MetLife attorneys and/or account representatives on complex claims involving legal issues or plan interpretations? ☒ Yes ☐ No
- 28) Evaluating claims for possible fraud? ☒ Yes ☐ No
- 29) Deciding whether a Claim Discussion Meeting ("CDM") with Unit Leaders, clinicians, vocational rehabilitation professionals, or other internal resources is needed for a claim? ☒ Yes ☐ No
- 30) Assessing whether an injured employee can return to work and what, if any, accommodations need to be made at the workplace to facilitate the employee's return? ☒ Yes ☐ No
- 31) Assessing the claimant's education, skills, alternate work experience, training, functionality and geographic area to determine whether he or she can return to work in any occupation? ☐ Yes ☒ No
- 32) Determining whether Labor Market Surveys, Transferable Skills Analysis or Own Occupational Assessments should be requested? ☐ Yes ☒ No
- 33) Evaluating whether the claimant is a candidate for vocational rehabilitation? ☒ Yes ☐ No
- 34) Acting as the owner of the long term disability claims in your assigned book of claims? ☒ Yes ☐ No
- 35) Evaluating the facts and the terms of the LTD plan and all medical information to determine whether to approve or deny a claim? ☒ Yes ☐ No
- 36) Rendering decisions (i.e., approval, denial, continuation, modification, termination) on claims for LTD benefits? ☒ Yes ☐ No
- 37) Validating the appropriate benefit amount for the claim and authorizing payment of claims up to prescribed per-month authority limits? ☒ Yes ☐ No
- 38) Preparing claim determination letters, including giving a reason for the claim decision, and communicating claim decisions to claimants? ☒ Yes ☐ No
- 39) Reassessing medical information, restrictions and limitations during the life of the claim to determine whether a claim should be continued, modified or terminated? ☒ Yes ☐ No
- 40) Mentoring and coaching less experienced LTD Claims Specialists? ☒ Yes ☐ No

Sharon DeFoye
PRINT NAME

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[Signature]
SIGN NAME

**METROPOLITAN LIFE INSURANCE COMPANY
LTD (and Sr. LTD) CLAIMS SPECIALIST SURVEY**

Name: Kim Kolupa Date: 2/6/18

Please fill out this survey and indicate below which of the following tasks you regularly perform or can perform in connection with the LTD claims in your book of claims. Answering "Yes" means you perform or can perform the task on some or all of your claims. Answering "No" means you do not ever perform that task or you do so rarely.

- 1) Verifying that the claimant is eligible for coverage under the LTD benefits plan? ☒ Yes ☐ No
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- 3) Reviewing and understanding the claimant's occupational duties and occupational requirements? ☒ Yes ☐ No
- 4) Analyzing the claimant's medical records, determining whether additional information is necessary and then evaluating whether the claimant's medical records are consistent with the medical diagnosis? ☒ Yes ☐ No
- 5) Communicating with health care providers and/or employers, including if information requires clarification? ☒ Yes ☐ No
- 6) Serving as the face of MetLife with claimants, health care providers and employers, including guiding the claimant through the claim process? ☒ Yes ☐ No
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- 11) Determining the claimant's motivation and expectations for returning to work with or without accommodations? ☒ Yes ☐ No
- 12) Determining the amount of any offsets or other amounts (such as social security, state disability benefits, workers' compensation, income from other occupations, settlement money for lost wages) that may impact the claimant's LTD benefits calculation? ☒ Yes ☐ No
- 13) Identifying and investigating discrepancies between the claimant's subjective complaints and the objective clinical findings in the claimant's medical records as well as any discrepancies in medical documentation? ☒ Yes ☐ No
- 14) Determining and/or formulating opinions regarding the claimant's actual level of functionality, considering all sources of information? ☒ Yes ☐ No *Sometimes with NC for HLR*
- 15) Conducting an interview with the claimant's employer and/or health care providers to obtain information relevant to the claim? ☒ Yes ☐ No
- 16) Assigning an appropriate "Likely Claims Progression" category for each claim and reviewing factual information to adjust that Progression if needed? ☒ Yes ☐ No
- 17) Developing and documenting an action plan and/or investigation scope for each claim (i.e., missing/needed information, discrepancies, to-do list, etc.)? ☒ Yes ☐ No
- 18) Evaluating the restrictions and limitations identified in the claimant's medical records and whether/how they impact the claimant's ability to perform their own occupation? ☒ Yes ☐ No

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- 19) In cases involving multiple diagnoses, determining which of the claimant's conditions is the disabling condition and/or what is causing or contributing to the claimant's impairment? ☒ Yes ___ No *Consult with NC*
- 20) Determining whether the primary disabling condition is an "excluded" condition under the claimant's LTD benefits plan? ☒ Yes ___ No
- 21) Determining whether to extend ERISA deadlines given the timing and circumstances of the claim? ☒ Yes ___ No
- 22) Determining whether and when it is appropriate to involve a clinician, vocational rehabilitation expert or other internal resource(s)? ☒ Yes ___ No
- 23) Determining whether a claim requires additional investigation, including by the Special Investigation Unit (i.e. home visits, surveillance, social media searches, etc.)? ☒ Yes ___ No
- 24) Evaluating and applying investigation materials/information received from the Special Investigation Unit? ☒ Yes ___ No
- 25) Having social media searches conducted (or ~~doing them on your own~~) and/or evaluating social media investigation findings? ☒ Yes ___ No
- 26) Evaluating whether the claimant is actually following the treatment plan recommended by his/her health care professional (filling prescriptions, participating in therapy, etc.)? ☒ Yes ___ No
- 27) Identifying and collaborating with MetLife attorneys and/or account representatives on complex claims involving legal issues or plan interpretations? ☒ Yes ___ No
- 28) Evaluating claims for possible fraud? ☒ Yes ___ No
- 29) Deciding whether a Claim Discussion Meeting ("CDM") with Unit Leaders, clinicians, vocational rehabilitation professionals, or other internal resources is needed for a claim? ☒ Yes ___ No
- 30) Assessing whether an injured employee can return to work and what, if any, accommodations need to be made at the workplace to facilitate the employee's return? ☒ Yes ___ No
- 31) Assessing the claimant's education, skills, alternate work experience, training, functionality and geographic area to determine whether he or she can return to work in any occupation? ☒ Yes ___ No
- 32) Determining whether Labor Market Surveys, Transferable Skills Analysis or Own Occupational Assessments should be requested? ☒ Yes ___ No *With VRC discussions*
- 33) Evaluating whether the claimant is a candidate for vocational rehabilitation? ☒ Yes ___ No
- 34) Acting as the owner of the long term disability claims in your assigned book of claims? ☒ Yes ___ No
- 35) Evaluating the facts and the terms of the LTD plan and all medical information to determine whether to approve or deny a claim? ☒ Yes ___ No
- 36) Rendering decisions (i.e., approval, denial, continuation, modification, termination) on claims for LTD benefits? ☒ Yes ___ No
- 37) Validating the appropriate benefit amount for the claim and authorizing payment of claims up to prescribed per-month authority limits? ☒ Yes ___ No
- 38) Preparing claim determination letters, including giving a reason for the claim decision, and communicating claim decisions to claimants? ☒ Yes ___ No
- 39) Reassessing medical information, restrictions and limitations during the life of the claim to determine whether a claim should be continued, modified or terminated? ☒ Yes ___ No
- 40) Mentoring and coaching less experienced LTD Claims Specialists? ___ Yes ___ No

Kim Kolupa

PRINT NAME

DBI/ 94376110.1

Kim Kolupa

SIGN NAME

METROPOLITAN LIFE INSURANCE COMPANY
LTD (and Sr. LTD) CLAIMS SPECIALIST SURVEY

Name: Joquella Randolph

Date: 2-8-18

Please fill out this survey and indicate below which of the following tasks you regularly perform or can perform in connection with the LTD claims in your book of claims. Answering "Yes" means you perform or can perform the task on some or all of your claims. Answering "No" means you do not ever perform that task or you do so rarely.

- 1) Verifying that the claimant is eligible for coverage under the LTD benefits plan? ☒ Yes ☐ No
- 2) Interpreting and understanding the applicable LTD plan provisions, including the definition of disability under the plan, and deciding whether a condition described in claimant's application meets the definition? ☒ Yes ☐ No
- 3) Reviewing and understanding the claimant's occupational duties and occupational requirements? ☒ Yes ☐ No
- 4) Analyzing the claimant's medical records, determining whether additional information is necessary and then evaluating whether the claimant's medical records are consistent with the medical diagnosis? ☒ Yes ☐ No
- 5) Communicating with health care providers and/or employers, including if information requires clarification? ☒ Yes ☐ No
- 6) Serving as the face of MetLife with claimants, health care providers and employers, including guiding the claimant through the claim process? ☒ Yes ☐ No
- 7) Interacting with attorneys where claimants are represented by counsel? ☒ Yes ☐ No
- 8) Deciding whether to interview claimants and conducting interviews with claimants (including deciding what questions to ask) prior to making the claim decision? ☒ Yes ☐ No
- 9) Assessing during the claimant interview whether the claimant is telling the truth, including making credibility determinations? ☒ Yes ☐ No
- 10) Evaluating whether the claimant's current activities are consistent with the diagnosis and restrictions? ☒ Yes ☐ No
- 11) Determining the claimant's motivation and expectations for returning to work with or without accommodations? ☒ Yes ☐ No
- 12) Determining the amount of any offsets or other amounts (such as social security, state disability benefits, workers' compensation, income from other occupations, settlement money for lost wages) that may impact the claimant's LTD benefits calculation? ☒ Yes ☐ No
- 13) Identifying and investigating discrepancies between the claimant's subjective complaints and the objective clinical findings in the claimant's medical records as well as any discrepancies in medical documentation? ☒ Yes ☐ No
- 14) Determining and/or formulating opinions regarding the claimant's actual level of functionality, considering all sources of information? ☒ Yes ☐ No
- 15) Conducting an interview with the claimant's employer and/or health care providers to obtain information relevant to the claim? ☒ Yes ☐ No
- 16) Assigning an appropriate "Likely Claims Progression" category for each claim and reviewing factual information to adjust that Progression if needed? ☒ Yes ☐ No
- 17) Developing and documenting an action plan and/or investigation scope for each claim (i.e., missing/needed information, discrepancies, to-do list, etc.)? ☒ Yes ☐ No
- 18) Evaluating the restrictions and limitations identified in the claimant's medical records and whether/how they impact the claimant's ability to perform their own occupation? ☒ Yes ☐ No

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- 19) In cases involving multiple diagnoses, determining which of the claimant's conditions is the disabling condition and/or what is causing or contributing to the claimant's impairment? ☐ Yes ☒ No *NE recommends*
- 20) Determining whether the primary disabling condition is an "excluded" condition under the claimant's LTD benefits plan? ☒ Yes ☐ No
- 21) Determining whether to extend ERISA deadlines given the timing and circumstances of the claim? ☒ Yes ☐ No
- 22) Determining whether and when it is appropriate to involve a clinician, vocational rehabilitation expert or other internal resource(s)? ☒ Yes ☐ No
- 23) Determining whether a claim requires additional investigation, including by the Special Investigation Unit (i.e. home visits, surveillance, social media searches, etc.)? ☒ Yes ☐ No
- 24) Evaluating and applying investigation materials/information received from the Special Investigation Unit? ☒ Yes ☐ No
- 25) Having social media searches conducted (or doing them on your own) and/or evaluating social media investigation findings? ☐ Yes ☒ No *I've never done or requested this*
- 26) Evaluating whether the claimant is actually following the treatment plan recommended by his/her health care professional (filling prescriptions, participating in therapy, etc.)? ☒ Yes ☐ No
- 27) Identifying and collaborating with MetLife attorneys and/or account representatives on complex claims involving legal issues or plan interpretations? ☒ Yes ☐ No
- 28) Evaluating claims for possible fraud? ☐ Yes ☐ No
- 29) Deciding whether a Claim Discussion Meeting ("CDM") with Unit Leaders, clinicians, vocational rehabilitation professionals, or other internal resources is needed for a claim? ☒ Yes ☐ No
- 30) Assessing whether an injured employee can return to work and what, if any, accommodations need to be made at the workplace to facilitate the employee's return? ☒ Yes ☐ No
- 31) Assessing the claimant's education, skills, alternate work experience, training, functionality and geographic area to determine whether he or she can return to work in any occupation? ☐ Yes ☒ No *refer to VRC*
- 32) Determining whether Labor Market Surveys, Transferable Skills Analysis or Own Occupational Assessments should be requested? ☒ Yes ☐ No
- 33) Evaluating whether the claimant is a candidate for vocational rehabilitation? ☒ Yes ☐ No
- 34) Acting as the owner of the long term disability claims in your assigned book of claims? ☒ Yes ☐ No
- 35) Evaluating the facts and the terms of the LTD plan and all medical information to determine whether to approve or deny a claim? ☒ Yes ☐ No
- 36) Rendering decisions (i.e., approval, denial, continuation, modification, termination) on claims for LTD benefits? ☒ Yes ☐ No
- 37) Validating the appropriate benefit amount for the claim and authorizing payment of claims up to prescribed per-month authority limits? ☒ Yes ☐ No
- 38) Preparing claim determination letters, including giving a reason for the claim decision, and communicating claim decisions to claimants? ☒ Yes ☐ No
- 39) Reassessing medical information, restrictions and limitations during the life of the claim to determine whether a claim should be continued, modified or terminated? ☒ Yes ☐ No
- 40) Mentoring and coaching less experienced LTD Claims Specialists? ☒ Yes ☐ No

Joquetta Randolph
PRINT NAME

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[Signature]
SIGN NAME

**METROPOLITAN LIFE INSURANCE COMPANY
LTD (and Sr. LTD) CLAIMS SPECIALIST SURVEY**

Name: Lina Stacey Date: 1-4-18

Please fill out this survey and indicate below which of the following tasks you regularly perform or can perform in connection with the LTD claims in your book of claims. Answering "Yes" means you perform or can perform the task on some or all of your claims. Answering "No" means you do not ever perform that task or you do so rarely.

- 1) Verifying that the claimant is eligible for coverage under the LTD benefits plan? X Yes ___ No
- 2) Interpreting and understanding the applicable LTD plan provisions, including the definition of disability under the plan, and deciding whether a condition described in claimant's application meets the definition? X Yes ___ No
- 3) Reviewing and understanding the claimant's occupational duties and occupational requirements? ___ Yes ___ No - *if not sure one via specialist is involved*
- 4) Analyzing the claimant's medical records, determining whether additional information is necessary and then evaluating whether the claimant's medical records are consistent with the medical diagnosis? Yes ___ No - *if unsure a medical doctor's help we have com*
- 5) Communicating with health care providers and/or employers, including if information requires clarification? X Yes ___ No *on NC involved*
- 6) Serving as the face of MetLife with claimants, health care providers and employers, including guiding the claimant through the claim process? X Yes ___ No
- 7) Interacting with attorneys where claimants are represented by counsel? X Yes ___ No
- 8) Deciding whether to interview claimants and conducting interviews with claimants (including deciding what questions to ask) prior to making the claim decision? X Yes ___ No
- 9) Assessing during the claimant interview whether the claimant is telling the truth, including making credibility determinations? X Yes ___ No
- 10) Evaluating whether the claimant's current activities are consistent with the diagnosis and restrictions? X Yes ___ No
- 11) Determining the claimant's motivation and expectations for returning to work with or without accommodations? X Yes ___ No
- 12) Determining the amount of any offsets or other amounts (such as social security, state disability benefits, workers' compensation, income from other occupations, settlement money for lost wages) that may impact the claimant's LTD benefits calculation? X Yes ___ No
- 13) Identifying and investigating discrepancies between the claimant's subjective complaints and the objective clinical findings in the claimant's medical records as well as any discrepancies in medical documentation? X Yes ___ No - *if unsure we could contact NC discussion*
- 14) Determining and/or formulating opinions regarding the claimant's actual level of functionality, considering all sources of information? X Yes ___ No
- 15) Conducting an interview with the claimant's employer and/or health care providers to obtain information relevant to the claim? X Yes ___ No
- 16) Assigning an appropriate "Likely Claims Progression" category for each claim and reviewing factual information to adjust that Progression if needed? X Yes ___ No
- 17) Developing and documenting an action plan and/or investigation scope for each claim (i.e., missing/needed information, discrepancies, to-do list, etc.)? X Yes ___ No
- 18) Evaluating the restrictions and limitations identified in the claimant's medical records and whether/how they impact the claimant's ability to perform their own occupation? X Yes ___ No - *if not sure get NC involvement*

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- 19) In cases involving multiple diagnoses, determining which of the claimant's conditions is the disabling condition and/or what is causing or contributing to the claimant's impairment? ☒ Yes ☐ No
- 20) Determining whether the primary disabling condition is an "excluded" condition under the claimant's LTD benefits plan? ☒ Yes ☐ No
- 21) Determining whether to extend ERISA deadlines given the timing and circumstances of the claim? ☒ Yes ☐ No
- 22) Determining whether and when it is appropriate to involve a clinician, vocational rehabilitation expert or other internal resource(s)? ☒ Yes ☐ No
- 23) Determining whether a claim requires additional investigation, including by the Special Investigation Unit (i.e. home visits, surveillance, social media searches, etc.)? ☒ Yes ☐ No
- 24) Evaluating and applying investigation materials/information received from the Special Investigation Unit? ☒ Yes ☐ No
- 25) Having social media searches conducted (or doing them on your own) and/or evaluating social media investigation findings? ☒ Yes ☐ No
- 26) Evaluating whether the claimant is actually following the treatment plan recommended by his/her health care professional (filling prescriptions, participating in therapy, etc.)? ☒ Yes ☐ No
- 27) Identifying and collaborating with MetLife attorneys and/or account representatives on complex claims involving legal issues or plan interpretations? ☒ Yes ☐ No
- 28) Evaluating claims for possible fraud? ☒ Yes ☐ No
- 29) Deciding whether a Claim Discussion Meeting ("CDM") with Unit Leaders, clinicians, vocational rehabilitation professionals, or other internal resources is needed for a claim? ☒ Yes ☐ No
- 30) Assessing whether an injured employee can return to work and what, if any, accommodations need to be made at the workplace to facilitate the employee's return? ☒ Yes ☐ No
- 31) Assessing the claimant's education, skills, alternate work experience, training, functionality and geographic area to determine whether he or she can return to work in any occupation? ☒ Yes ☐ No
- 32) Determining whether Labor Market Surveys, Transferable Skills Analysis or Own Occupational Assessments should be requested? ☒ Yes ☐ No
- 33) Evaluating whether the claimant is a candidate for vocational rehabilitation? ☒ Yes ☐ No
- 34) Acting as the owner of the long term disability claims in your assigned book of claims? ☒ Yes ☐ No
- 35) Evaluating the facts and the terms of the LTD plan and all medical information to determine whether to approve or deny a claim? ☒ Yes ☐ No
- 36) Rendering decisions (i.e., approval, denial, continuation, modification, termination) on claims for LTD benefits? ☒ Yes ☐ No
- 37) Validating the appropriate benefit amount for the claim and authorizing payment of claims up to prescribed per-month authority limits? ☒ Yes ☐ No
- 38) Preparing claim determination letters, including giving a reason for the claim decision, and communicating claim decisions to claimants? ☒ Yes ☐ No
- 39) Reassessing medical information, restrictions and limitations during the life of the claim to determine whether a claim should be continued, modified or terminated? ☒ Yes ☐ No
- 40) Mentoring and coaching less experienced LTD Claims Specialists? ☒ Yes ☐ No

Ana E. Ramirez

PRINT NAME

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Ana E. Ramirez

SIGN NAME

**METROPOLITAN LIFE INSURANCE COMPANY
LTD (and Sr. LTD) CLAIMS SPECIALIST SURVEY**

Name: Sheba Stephen Date: 2/17/18

Please fill out this survey and indicate below which of the following tasks you regularly perform or can perform in connection with the LTD claims in your book of claims. Answering "Yes" means you perform or can perform the task on some or all of your claims. Answering "No" means you do not ever perform that task or you do so rarely.

- 1) Verifying that the claimant is eligible for coverage under the LTD benefits plan? ☒ Yes ☐ No
- 2) Interpreting and understanding the applicable LTD plan provisions, including the definition of disability under the plan, and deciding whether a condition described in claimant's application meets the definition? ☒ Yes ☐ No
- 3) Reviewing and understanding the claimant's occupational duties and occupational requirements? ☒ Yes ☐ No
- 4) Analyzing the claimant's medical records, determining whether additional information is necessary and then evaluating whether the claimant's medical records are consistent with the medical diagnosis? ☒ Yes ☐ No
- 5) Communicating with health care providers and/or employers, including if information requires clarification? ☒ Yes ☐ No
- 6) Serving as the face of MetLife with claimants, health care providers and employers, including guiding the claimant through the claim process? ☒ Yes ☐ No
- 7) Interacting with attorneys where claimants are represented by counsel? ☒ Yes ☐ No
- 8) Deciding whether to interview claimants and conducting interviews with claimants (including deciding what questions to ask) prior to making the claim decision? ☒ Yes ☐ No
- 9) Assessing during the claimant interview whether the claimant is telling the truth, including making credibility determinations? ☒ Yes ☐ No
- 10) Evaluating whether the claimant's current activities are consistent with the diagnosis and restrictions? ☒ Yes ☐ No
- 11) Determining the claimant's motivation and expectations for returning to work with or without accommodations? ☒ Yes ☐ No
- 12) Determining the amount of any offsets or other amounts (such as social security, state disability benefits, workers' compensation, income from other occupations, settlement money for lost wages) that may impact the claimant's LTD benefits calculation? ☒ Yes ☐ No
- 13) Identifying and investigating discrepancies between the claimant's subjective complaints and the objective clinical findings in the claimant's medical records as well as any discrepancies in medical documentation? ☒ Yes ☐ No
- 14) Determining and/or formulating opinions regarding the claimant's actual level of functionality, considering all sources of information? ☒ Yes ☐ No
- 15) Conducting an interview with the claimant's employer and/or health care providers to obtain information relevant to the claim? ☒ Yes ☐ No
- 16) Assigning an appropriate "Likely Claims Progression" category for each claim and reviewing factual information to adjust that Progression if needed? ☒ Yes ☐ No
- 17) Developing and documenting an action plan and/or investigation scope for each claim (i.e., missing/needed information, discrepancies, to-do list, etc.)? ☒ Yes ☐ No
- 18) Evaluating the restrictions and limitations identified in the claimant's medical records and whether/how they impact the claimant's ability to perform their own occupation? ☒ Yes ☐ No

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- 19) In cases involving multiple diagnoses, determining which of the claimant's conditions is the disabling condition and/or what is causing or contributing to the claimant's impairment? ☒ Yes ☐ No
- 20) Determining whether the primary disabling condition is an "excluded" condition under the claimant's LTD benefits plan? ☒ Yes ☐ No
- 21) Determining whether to extend ERISA deadlines given the timing and circumstances of the claim? ☒ Yes ☐ No
- 22) Determining whether and when it is appropriate to involve a clinician, vocational rehabilitation expert or other internal resource(s)? ☒ Yes ☐ No
- 23) Determining whether a claim requires additional investigation, including by the Special Investigation Unit (i.e. home visits, surveillance, social media searches, etc.)? ☒ Yes ☐ No
- 24) Evaluating and applying investigation materials/information received from the Special Investigation Unit? ☒ Yes ☐ No
- 25) Having social media searches conducted (or doing them on your own) and/or evaluating social media investigation findings? ☒ Yes ☐ No
- 26) Evaluating whether the claimant is actually following the treatment plan recommended by his/her health care professional (filling prescriptions, participating in therapy, etc.)? ☒ Yes ☐ No
- 27) Identifying and collaborating with MetLife attorneys and/or account representatives on complex claims involving legal issues or plan interpretations? ☒ Yes ☐ No
- 28) Evaluating claims for possible fraud? ☒ Yes ☐ No
- 29) Deciding whether a Claim Discussion Meeting ("CDM") with Unit Leaders, clinicians, vocational rehabilitation professionals, or other internal resources is needed for a claim? ☒ Yes ☐ No
- 30) Assessing whether an injured employee can return to work and what, if any, accommodations need to be made at the workplace to facilitate the employee's return? ☒ Yes ☐ No
- 31) Assessing the claimant's education, skills, alternate work experience, training, functionality and geographic area to determine whether he or she can return to work in any occupation? ☒ Yes ☐ No
- 32) Determining whether Labor Market Surveys, Transferable Skills Analysis or Own Occupational Assessments should be requested? ☒ Yes ☐ No
- 33) Evaluating whether the claimant is a candidate for vocational rehabilitation? ☒ Yes ☐ No
- 34) Acting as the owner of the long term disability claims in your assigned book of claims? ☒ Yes ☐ No
- 35) Evaluating the facts and the terms of the LTD plan and all medical information to determine whether to approve or deny a claim? ☒ Yes ☐ No
- 36) Rendering decisions (i.e., approval, denial, continuation, modification, termination) on claims for LTD benefits? ☒ Yes ☐ No
- 37) Validating the appropriate benefit amount for the claim and authorizing payment of claims up to prescribed per-month authority limits? ☒ Yes ☐ No
- 38) Preparing claim determination letters, including giving a reason for the claim decision, and communicating claim decisions to claimants? ☒ Yes ☐ No
- 39) Reassessing medical information, restrictions and limitations during the life of the claim to determine whether a claim should be continued, modified or terminated? ☒ Yes ☐ No
- 40) Mentoring and coaching less experienced LTD Claims Specialists? ☒ Yes ☐ No

Sheba Stephen

PRINT NAME

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SIGN NAME

**METROPOLITAN LIFE INSURANCE COMPANY
LTD (and Sr. LTD) CLAIMS SPECIALIST SURVEY**

Name: Shawn Stephenson Date: 1-4-18

Please fill out this survey and indicate below which of the following tasks you regularly perform or can perform in connection with the LTD claims in your book of claims. Answering "Yes" means you perform or can perform the task on some or all of your claims. Answering "No" means you do not ever perform that task or you do so rarely.

- 1) Verifying that the claimant is eligible for coverage under the LTD benefits plan? ☒ Yes ☐ No
- 2) Interpreting and understanding the applicable LTD plan provisions, including the definition of disability under the plan, and deciding whether a condition described in claimant's application meets the definition? ☒ Yes ☐ No
- 3) Reviewing and understanding the claimant's occupational duties and occupational requirements? ☒ Yes ☐ No *but sometimes VAC.*
- 4) Analyzing the claimant's medical records, determining whether additional information is necessary and then evaluating whether the claimant's medical records are consistent with the medical diagnosis? ☒ Yes ☒ No *but sometimes VAC. - CMA MC*
- 5) Communicating with health care providers and/or employers, including if information requires clarification? ☒ Yes ☐ No *assess*
- 6) Serving as the face of MetLife with claimants, health care providers and employers, including guiding the claimant through the claim process? ☒ Yes ☐ No
- 7) Interacting with attorneys where claimants are represented by counsel? ☒ Yes ☐ No
- 8) Deciding whether to interview claimants and conducting interviews with claimants (including deciding what questions to ask) prior to making the claim decision? ☒ Yes ☐ No
- 9) Assessing during the claimant interview whether the claimant is telling the truth, including making credibility determinations? ☒ Yes ☒ No ** need to assess claim facts with other special by attorneys.*
- 10) Evaluating whether the claimant's current activities are consistent with the diagnosis and restrictions? ☒ Yes ☐ No
- 11) Determining the claimant's motivation and expectations for returning to work with or without accommodations? ☒ Yes ☐ No
- 12) Determining the amount of any offsets or other amounts (such as social security, state disability benefits, workers' compensation, income from other occupations, settlement money for lost wages) that may impact the claimant's LTD benefits calculation? ☒ Yes ☐ No
- 13) Identifying and investigating discrepancies between the claimant's subjective complaints and the objective clinical findings in the claimant's medical records as well as any discrepancies in medical documentation? ☒ Yes ☒ No *- with assistance from our clinical staff when needed*
- 14) Determining and/or formulating opinions regarding the claimant's actual level of functionality, considering all sources of information? ☒ Yes ☐ No
- 15) Conducting an interview with the claimant's employer and/or health care providers to obtain information relevant to the claim? ☒ Yes ☐ No
- 16) Assigning an appropriate "Likely Claims Progression" category for each claim and reviewing factual information to adjust that Progression if needed? ☒ Yes ☐ No
- 17) Developing and documenting an action plan and/or investigation scope for each claim (i.e., missing/needed information, discrepancies, to-do list, etc.)? ☒ Yes ☐ No
- 18) Evaluating the restrictions and limitations identified in the claimant's medical records and whether/how they impact the claimant's ability to perform their own occupation? ☒ Yes ☐ No *- sometimes need nurse, medical doctor independent review opinions.*

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- 19) In cases involving multiple diagnoses, determining which of the claimant's conditions is the disabling condition and/or what is causing or contributing to the claimant's impairment? ☒ Yes ☐ No *functional & with MC assistance*
- 20) Determining whether the primary disabling condition is an "excluded" condition under the claimant's LTD benefits plan? ☒ Yes ☐ No
- 21) Determining whether to extend ERISA deadlines given the timing and circumstances of the claim? ☒ Yes ☐ No
- 22) Determining whether and when it is appropriate to involve a clinician, vocational rehabilitation expert or other internal resource(s)? ☒ Yes ☐ No
- 23) Determining whether a claim requires additional investigation, including by the Special Investigation Unit (i.e. home visits, surveillance, social media searches, etc.)? ☒ Yes ☐ No
- 24) Evaluating and applying investigation materials/information received from the Special Investigation Unit? ☒ Yes ☐ No
- 25) Having social media searches conducted (or doing them on your own) and/or evaluating social media investigation findings? ☒ Yes ☐ No
- 26) Evaluating whether the claimant is actually following the treatment plan recommended by his/her health care professional (filling prescriptions, participating in therapy, etc.)? ☒ Yes ☐ No
- 27) Identifying and collaborating with MetLife attorneys and/or account representatives on complex claims involving legal issues or plan interpretations? ☒ Yes ☐ No
- 28) Evaluating claims for possible fraud? ☒ Yes ☐ No
- 29) Deciding whether a Claim Discussion Meeting ("CDM") with Unit Leaders, clinicians, vocational rehabilitation professionals, or other internal resources is needed for a claim? ☒ Yes ☐ No
- 30) Assessing whether an injured employee can return to work and what, if any, accommodations need to be made at the workplace to facilitate the employee's return? ☒ Yes ☐ No
- 31) Assessing the claimant's education, skills, alternate work experience, training, functionality and geographic area to determine whether he or she can return to work in any occupation? ☒ Yes ☐ No *with MC assistance*
- 32) Determining whether Labor Market Surveys, Transferable Skills Analysis or Own Occupational Assessments should be requested? ☒ Yes ☐ No *with MC assistance*
- 33) Evaluating whether the claimant is a candidate for vocational rehabilitation? ☒ Yes ☐ No
- 34) Acting as the owner of the long term disability claims in your assigned book of claims? ☒ Yes ☐ No
- 35) Evaluating the facts and the terms of the LTD plan and all medical information to determine whether to approve or deny a claim? ☒ Yes ☐ No
- 36) Rendering decisions (i.e., approval, denial, continuation, modification, termination) on claims for LTD benefits? ☒ Yes ☐ No
- 37) Validating the appropriate benefit amount for the claim and authorizing payment of claims up to prescribed per-month authority limits? ☒ Yes ☐ No
- 38) Preparing claim determination letters, including giving a reason for the claim decision, and communicating claim decisions to claimants? ☒ Yes ☐ No
- 39) Reassessing medical information, restrictions and limitations during the life of the claim to determine whether a claim should be continued, modified or terminated? ☒ Yes ☐ No
- 40) Mentoring and coaching less experienced LTD Claims Specialists? ☒ Yes ☐ No

Sharon Stephenson
PRINT NAME
DB1/ 94376110.1

Sharon Stephenson
SIGN NAME